



Colorado Weed Management Association 2010 Annual Membership Application

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The mission of CWMA is to provide education, regulatory direction, professional improvement, and environmental awareness to preserve and protect our natural resources from the degrading impacts of invasive species (terrestrial and aquatic vegetation) in Colorado and surrounding states.

Colorado Weed Management Association Member Benefits:

- Weed Watch: CWMA's newsletter includes timely articles on weed management, tours and activities.
- CWMA Website: www.cwma.org. We are proud to maintain an informative and authoritative website of Colorado weed management topics.
- Educational Materials: CWMA publishes many informative noxious weed publications to help you maximize your weed management skills.
- Events: Members receive a discounted rate at CWMA hosted events such as the spring training seminar and annual conference & tradeshow. Plus professional improvement and weed education tours to help you improve your weed management skills.
- Committees: Members may assist in the planning and development of CWMA products and programs through committee participation.

Individual Membership (\$65/person/year)..... \$ _____

Group Membership (\$260/year)..... \$ _____
Includes membership for up to five people from your organization. Seasonal members can be included in your group with names to be submitted after hire.

Student /Retired Professional Membership (\$20/person/year)..... \$ _____
High School, College Students and Retired Professionals are non-voting members that receive all of the other benefits of membership.

TOTAL \$ _____

MEMBER INFORMATION Is this is a changed address: YES NO

Agency/Company: _____ County: _____

Name (1): _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Phone: (_____) _____ Fax: (_____) _____ County: _____

Please list additional members if joining as a group (include mailing addresses (if different) to receive individual CWMA Newsletters

Name (2): _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Phone: (_____) _____ Fax: (_____) _____ County: _____

Name (3): _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Phone: (_____) _____ Fax: (_____) _____ County: _____

Name (4): _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Phone: (_____) _____ Fax: (_____) _____ County: _____

Name (5): _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Phone: (_____) _____ Fax: (_____) _____ County: _____

My check is enclosed. Federal ID #74-2485816

Please use this Membership Application as your invoice and make checks payable to Colorado Weed Management Association (CWMA).

VISA MASTERCARD AMEX DISCOVER (Please print clearly)

Credit Card Number: _____ Expiration ____ / ____

Signature: _____ Cardholder Name _____

Join Us Today!

*Gain Access to a Wealth of Information, Learn Integrated Weed Management Strategies & Improve Your Weed Identification Skills
For more information please visit us at our website at www.CWMA.org*